

DODGE

COUNTY HIGHWAY DEPT

**APPLICATION/PERMIT to CONSTRUCT, OPERATE,
and MAINTAIN UTILITIES WITHIN HIGHWAY
RIGHT-OF-WAY**

Applicant/Company: _____
 Address: _____

 Office Phone: _____
 Local Phone & Pager: _____
 Plans Prepared By: _____
 Preparer's Phone: _____

LOCATION INFORMATION

Highway(s): _____

Town/Village/City of: _____

_____ ¼ of the _____ ¼ Sec _____ T _____ N _____ R _____ E

ADDITIONAL INFORMATIONAnnual Service Connection Permit? ☐ Yes ☐ No

Utility Work Order # _____

Fee Required? ☐ Yes ☐ No Amount \$ _____**DESCRIPTION OF PROPOSED WORK (Check and fill out all that apply)**

UTILITY TYPE: ☐ Electric ☐ Gas/petroleum ☐ Communications ☐ Water ☐ Sanitary sewer ☐ Private line
☐ Transmission ☐ Distribution ☐ Service Facility Size/Capacity: _____

(diameter, # fibers, psi, Kv, etc.)

ORIENTATION: ☐ Overhead ☐ Underground ☐ Parallel to hwy centerline ☐ Hwy crossing ☐ Bridge attachment ☐ TunnelWORK TYPE: ☐ New construction ☐ Improve/repair existing ☐ Maintenance ☐ Removal ☐ Abandon in placeCONSTRUCTION METHOD(S): ☐ Plow ☐ Trench ☐ Bore ☐ Suspend on poles/towers ☐ Open cut hwy ☐ Cased☐ Tree cutting/removal ☐ Chemical treatment of trees/brushErosion Control Designation: ☐ Major ☐ Minor

Provide additional narrative if needed: _____

NAME AND PHONE NUMBER OF UTILITY REPRESENTATIVE
 RESPONSIBLE FOR CONSTRUCTION: _____

Estimated Starting Date: _____ Estimated Completion/Restoration Date: _____

The Applicant understands and agrees that the permitted work shall comply with all permit provisions and conditions of the Utility Accommodation Policy of the above-named county in effect at the time of this application, and with any special provisions listed below or attached hereto, and any and all plans, details, or notes attached hereto and made a part thereof.

By: _____
 (Signature of Applicant/Company Authorized Representative) (Title) (Date)

(Typed/Printed Name of Person Signing Above or Electronic Signature Code) (Authorized Applicant/Company Representative Telephone Number)

DO NOT WRITE BELOW THIS LINE**PERMIT APPROVAL BY PERMITTING AUTHORITY**

The foregoing application is hereby approved and permit issued by the Permitting Authority subject to full compliance by the Applicant with all provisions and conditions stated in the Utility Accommodation Policy of the above-named county including the Indemnification as included in 96.03 of the WCHA Utility Accommodation Policy in effect on the date of this application.

Supplemental Provisions Attached: ☐ Yes ☐ No

By: _____
 (Authorized Representative for County)

(Title)

(Date)

Date Revised: 1/5/01 clm

FEE RECEIVED: \$ _____

CHECK NUMBER: _____

DATE ISSUED: _____

HWY PROJECT #: _____

PERMIT NUMBER: _____